

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mordechai M. Beizer, Daniel Berg, Rand Scullard, Pradeep R. Simha, and
Mark A. Solomon

Application No.: 09/136,244

Group: 3694

Filed: August 19, 1998

Examiner: Ella Colbert

Confirmation No: 1470

For: STRUCTURED WORKFOLDER

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	57	MINUS	* 58	0
INDEP	3	MINUS	** 3	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 25	\$
X	\$ 100	\$
+	\$ 180	\$

TOTAL = \$ 0

OR

OTHER THAN
SMALL ENTITY

	RATE	ADDIT. FEE
X	50	\$
X	\$ 200	\$
+	\$ 360	\$

TOTAL = \$ 0

* not fewer than 20

** not fewer than 3

The Application Size Fee has been calculated as shown below:*(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

SMALL ENTITY

Rate	Total Amount Owed
X \$125	\$[]

OTHER THAN
SMALL ENTITY

Rate	Total Amount Owed
X \$250	\$[]

Payment Sufficient for up to
[] Sheets

Petition for Extension of Time

☐ Applicant hereby petitions to extend the time to respond to the [] dated [] for [] month(s) from [] to []. The appropriate fee is set forth below.

☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:	\$	_____
_____		\$	_____
_____		\$	_____
TOTAL:		\$	_____

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$	_____
<input type="checkbox"/>	Claims Fee	\$	_____
<input type="checkbox"/>	Application Size Fee	\$	_____
<input type="checkbox"/>	Other Fees:	\$	_____
_____		\$	_____
_____		\$	_____
TOTAL:		\$	_____

- ☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Mary Lou Wakimura
 Mary Lou Wakimura
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Concord, Massachusetts 01742-9133

Dated: 7/4/07